## Issue Classification

(Primary Examiner)

**ORIGINAL** 

Carl S Miller

| Application/Control No. | Applicant(s)/Patent Under Reexamination |
|-------------------------|---|
| 10719362                | FRENCH, JACK                            |
| Examiner                | Art Unit                                |

3747

INTERNATIONAL CLASSIFICATION

| CLASS                       |                                     | SUBCLASS |  |  | CLAIMED                                 |          |   |   |                       |       | NON-CLAIMED       |  |  |  |  |  |
|-----------------------------|-------------------------------------|----------|--|--|---|----------|---|---|-----------------------|-------|-------------------|--|--|--|--|--|
| 239 585.5                   |                                     |          |  |  | В                                       | 0        | 5 | В | 1 / 30 (2006.0        | 1.01) |                   |  |  |  |  |  |
| CROSS REFERENCE(S)          |                                     |          |  |  |   |          |   |   |                       |       |                   |  |  |  |  |  |
|                             |                                     |          |  |  |   |          |   |   |                       |       |                   |  |  |  |  |  |
| CLASS                       | S SUBCLASS (ONE SUBCLASS PER BLOCK) |          |  |  |   |          |   |   |                       |       |                   |  |  |  |  |  |
| 239                         | 600                                 |          |  |  |   |          |   |   |                       |       |                   |  |  |  |  |  |
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|                             |                                     |          |  |  |   |          |   |   |                       |       |                   |  |  |  |  |  |
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|                             |                                     |          |  |  |   | _        |   |   |                       |       |                   |  |  |  |  |  |
|                             |                                     |          |  |  |   | _        |   |   |                       |       |                   |  |  |  |  |  |
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|                             |                                     |          |  |  | -                                       | -        |   |   |                       |       |                   |  |  |  |  |  |
|                             |                                     |          |  |  |   | $\vdash$ |   |   |                       |       | _                 |  |  |  |  |  |
|                             |                                     |          |  |  | -                                       | _        |   |   |                       |       |                   |  |  |  |  |  |
|                             |                                     |          |  |  |   | $\vdash$ |   |   |                       |       | -                 |  |  |  |  |  |
|                             |                                     |          |  |  |   | $\vdash$ |   |   |                       |       | -                 |  |  |  |  |  |
|                             |                                     |          |  |  |   | $\vdash$ |   |   |                       |       | $\dashv$          |  |  |  |  |  |
|                             |                                     |          |  |  |   | $\vdash$ |   |   |                       |       | $\dashv$          |  |  |  |  |  |
|                             |                                     |          |  |  |   | <u>_</u> |   |   |                       |       |                   |  |  |  |  |  |
| NONE                        |                                     |          |  |  |   |          |   |   | Total Claims Allowed: |       |                   |  |  |  |  |  |
|                             |                                     |          |  |  | 4                                       |          |   |   |                       |       |                   |  |  |  |  |  |
| (Assistant Examiner) (Date) |                                     |          |  |  |   |          |   |   | 1                     |       |                   |  |  |  |  |  |
| /Carl S Miller/             |                                     |          |  |  | 3/26/081 O.G. Print Claim(s) O.G. Print |          |   |   |                       |       | O.G. Print Figure |  |  |  |  |  |

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